

Development and Interim Evaluation of WeCare Indiana: a Community-tailored Text Messaging Intervention to Reduce Infant Mortality in East Central Indiana

¹Gelarden IA, ²Shieh C, ³Clark JL, ^{4,5}Fry SJ, ^{4,5}Smithson GE, ⁴Thomas RR, ^{4,6}Umoren RA

¹Indiana University School of Medicine

²Department of Community and Health Systems, Indiana University School of Nursing

³Open Door Health Services, Muncie, Indiana

⁴Indiana University Health Ball Memorial Hospital, Muncie, Indiana

⁵Delaware County Health Department, Muncie, Indiana

⁶Department of Pediatrics-Neonatology, Indiana University School of Medicine

Background: Text messaging is an effective way to distribute health information and reduce risky health behaviors.^{1,2} In 2014, the East Central Indiana Fetal and Infant Mortality Program of the Delaware County Health Department developed a community-based text messaging intervention program called “WeCare Indiana” as an innovative approach to promote positive pregnancy outcomes. This abstract reports the interim evaluation of health promotional text messages for prenatal clients.

Methods: The program was developed using a community-collaborative model. Over 200 prenatal and infant health text messages were reviewed and evaluated by community representatives. Messages included information regarding fetal and infant development, health promotion, and risk prevention strategies with links to local resources. Prenatal messages were then reviewed by prenatal clients for their relevance, clarity, and likelihood to change health-related behavior during pregnancy. The program was promoted locally and currently has 98 enrollees. A 4-month interim program evaluation was developed to assess program awareness, reasons for enrolling or not enrolling, and overall satisfaction with text message content. A convenience sample of prenatal clients at a Federally Qualified Health Center participated in the evaluation process.

Results: Of the 43 prenatal clients that participated, 10 (23%) clients had heard about the health messaging service. Of those participants, 6 (60%) had chosen to enroll in the program. Enrollees reported hearing about the program through word of mouth, posters, fliers, health care providers, and social media. Reasons given for not enrolling included lack of awareness or interest, technical difficulties, and procrastination. All enrollees reported that the messages were helpful.

Conclusions: An effort to reduce fetal and infant mortality in East Central Indiana led to the development and evaluation of community-tailored health messages. The evaluation results will be used to encourage client awareness and enrollment in the program.

References:

- ¹ Cole-Lewis, H., and T. Kershaw. “Text Messaging as a Tool for Behavior Change in Disease Prevention and Management.” *Epidemiologic Reviews*, vol. 32, no. 1, 2010, pp. 56–69.
- ² Krishna, S., et al.. “Healthcare via Cell Phones: A Systematic Review.” *Telemedicine and e-Health*, vol. 15, no. 3, 2009, pp. 231–240.